

STATE OF NEW HAMPSHIRE
PART TIME ACTIVE NEPBA LOCAL 040, 045, 260, 265 AND 270 EMPLOYEES
STATE & EMPLOYEE CONTRIBUTION CHART
WITH \$30/\$42/\$52 EE CONTRIBUTIONS
EFFECTIVE 08/21/2015

The employee's share of Point of Service and HMO plans are the 26 PP respective working rate, less the employee share from the CBA (\$30/\$42/\$52), times the % of participation, then the employee share from the CBA (\$30/\$42/\$52) added back.

HMO**30 HOURS TO 31.5 HOURS**

HMO EE CONTRIBUTION			HMO ER CONTRIBUTION		W RATE
	26PP	ANNUAL	26PP	ANNUAL	TOTAL
HL-1	\$85.75	\$2,229.50	\$222.99	\$5,797.74	\$8,027.24
HL-2	\$157.09	\$4,084.34	\$460.36	\$11,969.36	\$16,053.70
HL-3	\$239.18	\$6,218.68	\$748.73	\$19,466.98	\$25,685.66

POS

POS EE CONTRIBUTION			POS ER CONTRIBUTION		W RATE
	26PP	ANNUAL	26PP	ANNUAL	TOTAL
HL-1	\$100.34	\$2,608.84	\$281.38	\$7,315.88	\$9,924.72
HL-2	\$186.29	\$4,843.54	\$577.15	\$15,005.90	\$19,849.44
HL-3	\$285.90	\$7,433.40	\$935.61	\$24,325.86	\$31,759.26

HMO**32 HOURS TO 34.5 HOURS**

HMO EE CONTRIBUTION			HMO ER CONTRIBUTION		W RATE
	26PP	ANNUAL	26PP	ANNUAL	TOTAL
HL-1	\$71.81	\$1,867.06	\$236.93	\$6,160.18	\$8,027.24
HL-2	\$128.32	\$3,336.32	\$489.13	\$12,717.38	\$16,053.70
HL-3	\$192.39	\$5,002.14	\$795.52	\$20,683.52	\$25,685.66

POS

POS EE CONTRIBUTION		POS ER CONTRIBUTION		W RATE	
	<u>26PP</u>	<u>ANNUAL</u>	<u>26PP</u>	<u>ANNUAL</u>	<u>TOTAL</u>
HL-1	\$82.76	\$2,151.76	\$298.96	\$7,772.96	\$9,924.72
HL-2	\$150.22	\$3,905.72	\$613.22	\$15,943.72	\$19,849.44
HL-3	\$227.43	\$5,913.18	\$994.08	\$25,846.08	\$31,759.26

HMO**35 HOURS TO 37 HOURS**

HMO EE CONTRIBUTION			HMO ER CONTRIBUTION		W RATE
	26PP	ANNUAL	26PP	ANNUAL	TOTAL
HL-1	\$49.51	\$1,287.26	\$259.23	\$6,739.98	\$8,027.24
HL-2	\$82.28	\$2,139.28	\$535.17	\$13,914.42	\$16,053.70
HL-3	\$117.51	\$3,055.26	\$870.40	\$22,630.40	\$25,685.66

POS

POS EE CONTRIBUTION			POS ER CONTRIBUTION		W RATE
	26PP	ANNUAL	26PP	ANNUAL	TOTAL
HL-1	\$54.62	\$1,420.12	\$327.10	\$8,504.60	\$9,924.72
HL-2	\$92.50	\$2,405.00	\$670.94	\$17,444.44	\$19,849.44
HL-3	\$133.87	\$3,480.62	\$1,087.64	\$28,278.64	\$31,759.26

FT EMPLOYEE CONTRIBUTION	
	26 PP
HL-1: 1 PERSON	\$ 30.00
HL-2: 2 PERSON	\$ 42.00
HL-3: FAMILY	\$ 52.00

MONTHLY WORKING RATES			
	POS	HMO	
HL-1: 1 PERSON	\$ 827.07	\$ 668.94	
HL-2: 2 PERSON	\$ 1,654.11	\$ 1,337.80	
HL-3: FAMILY	\$ 2,646.61	\$ 2,140.48	

POS 26 PP		%			
HL-1: 1 PERSON	381.72	20%	70.34	30.00	100.34
HL-2: 2 PERSON	763.44	20%	144.29	42.00	186.29
HL-3: FAMILY	1,221.51	20%	233.90	52.00	285.90

HMO 26 PP		%			
HL-1: 1 PERSON	308.74	20%	55.75	30.00	85.75
HL-2: 2 PERSON	617.45	20%	115.09	42.00	157.09
HL-3: FAMILY	987.91	20%	187.18	52.00	239.18

POINT OF SERVICE (POS)										HEALTH MAINTENANCE ORGANIZATION (HMO)									
COMPANY-STATE SHARE (3006)					EMPLOYEE SHARE (3004)					COMPANY-STATE SHARE (3003)					EMPLOYEE SHARE (3001)				
WEEKLY HRS RANGE	%	TYPE	PLAN	AMT PER 26 PP	%	TYPE	PLAN	AMT PER 26 PP		%	TYPE	PLAN	AMT PER 26 PP	%	TYPE	PLAN	AMT PER 26 PP		
30.0	80%	HL	1	281.38	20%	HL	1	100.34		80%	HL	1	222.99	20%	HL	1	85.75		
		HL	2	577.15		HL	2	186.29			HL	2	460.36		HL	2	157.09		
(30 to 31.5)		HL	3	935.61		HL	3	285.90			HL	3	748.73		HL	3	239.18		
32.0	85%	HL	1	298.96	15%	HL	1	82.76		85%	HL	1	236.93	15%	HL	1	71.81		
		HL	2	613.22		HL	2	150.22			HL	2	489.13		HL	2	128.32		
(32 to 34.5)		HL	3	994.08		HL	3	227.43			HL	3	795.52		HL	3	192.39		
35.0	93%	HL	1	327.10	7%	HL	1	54.62		93%	HL	1	259.23	7%	HL	1	49.51		
		HL	2	670.94		HL	2	92.50			HL	2	535.17		HL	2	82.28		
(35 to 37)		HL	3	1087.64		HL	3	133.87			HL	3	870.40		HL	3	117.51		
FULL TIME	100%	HL	1	351.72	0%	HL	1	30.00		100%	HL	1	278.74	0%	HL	1	30.00		
		HL	2	721.44		HL	2	42.00			HL	2	575.45		HL	2	42.00		
(37.5 to >)		HL	3	1169.51		HL	3	52.00			HL	3	935.91		HL	3	52.00		